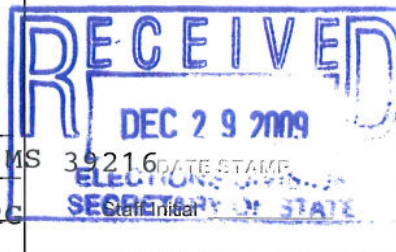


**POLITICAL COMMITTEE'S
REPORT OF RECEIPTS AND DISBURSEMENTS**

LEN PAC

Name of Committee Lender's Political Action Committee
Address of Committee 3 Lakeland Circle, Suite 201, Jackson, MS 39216
Fax 6019813834 E-mail MCFASSN@YAHOO.COM Website WWW.MCFASSN.ORG
Name of Director _____ Telephone 6019813834
Name of Treasurer Pat Grubbs Telephone _____



TYPE OF REPORT

- ☐ April 29, 2009 Pre-Election Report (January 1, 2009, through April 25, 2009).....All Primary Committees
☐ May 12, 2009 Pre-Runoff Report (April 26, 2009, through May 9, 2009)Runoff Committees Only
☐ May 26, 2009 Pre-Election Report (April 26, 2009, through May 23, 2009)All General Committees
☐ June 09, 2009 Pre-Runoff Report (May 24, 2009, through June 6, 2009).....Runoff Committees Only
☒ January 29, 2010 Annual Report (January 1, 2009, through December 31, 2009).....All Candidates and
Political Committees
☐ Termination Report (Political Committee will no longer accept contributions or make
campaign expenditures and has no outstanding campaign debt or obligations.) Required to terminate
reporting obligations

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the political committee shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
(2) Until a political committee files a termination report, annual and periodic reports must continue to be filed in accordance with Miss. Code Ann. §23-15-807 (b)(ii) and (iii)(1972).
(3) The appropriate office must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.
(4) Contributions to political committees in excess of \$200 received after the reporting period but more than 48 hours before 12:01 a.m. on the day of the election must be reported by FAX or otherwise within 48 hours of the contribution. Use separate form "48 Hour Report" to report such activity.
(5) This form should not be used by judicial candidates or their political committees. Candidates for judicial office must use Form SS 00-01 (Authorized Judicial Political Committee's Report of Receipts and Disbursements).

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

| | This Period | Calendar year-to-date |
|---|---------------|--------------------------|
| Total amount of contributions (itemized + non-itemized) | \$ 55,150.00 | \$55,150.00 |
| Total amount of disbursements (itemized + non-itemized) | \$ 41,150.00 | \$41,150.00 |
| Total amount of cash on hand | \$ 137,652.57 | |

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Pat Grubbs
Signature of Treasurer or Director

12-28-09
Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Political Committees associated with statewide or multi-county elections return form to
Delbert Hosemann, Secretary of State, Elections Division, PO Box 136, Jackson, MS 39205 or fax to 601-359-1499.
2. Political Committees associated with single county elections should return this form to their county Circuit Clerk.

Len Pac
Lenders Political Action Committee

Name of Candidate or Committee Lenders Political Action Committee
 Reporting period 1/1/09 through 12/31/09

ITEMIZED DISBURSEMENTS

| | | |
|--|---|--|
| A. Full name <u>Delbert Hosemann</u> | Date (Mo., Day, Year) <u>10/28/09</u> | Amount of each disbursement this period \$ <u>500.00</u> |
| Mailing Address <u>P.O. Box 320123</u> | | |
| City, State, Zip Code <u>Flowood, MS 39232</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ <u>500.00</u> |
| B. Full name <u>Mike Chaney</u> | Date (Mo., Day, Year) <u>5/13/09</u> | Amount of each disbursement this period \$ <u>1,000.00</u> |
| Mailing Address <u>P.O. Box 53</u> | | |
| City, State, Zip Code <u>Wesson, MS 39191</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ <u>1,000.00</u> |
| C. Full name <u>Phil Bryant</u> | Date (Mo., Day, Year) <u>4/17/09</u> | Amount of each disbursement this period \$ <u>5,000.00</u> |
| Mailing Address <u>P.O. Box XXXXX 321226</u> | | |
| City, State, Zip Code <u>Flowood, MS 39232</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ <u>5,000.00</u> |
| D. Full name <u>Bubba Carpenter</u> | Date (Mo., Day, Year) <u>11/17/09</u> | Amount of each disbursement this period \$ <u>500.00</u> |
| Mailing Address <u>8 Carpenter Drive</u> | | |
| City, State, Zip Code <u>Burnsville, MS 39933</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ <u>500.00</u> |
| E. Full name <u>Warner McBride</u> | Date (Mo., Day, Year) <u>11/9/09</u> | Amount of each disbursement this period \$ <u>500.00</u> |
| Mailing Address <u>180 Woodlands Cove</u> | | |
| City, State, Zip Code <u>Brandon, MS 39047</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ <u>500.00</u> |
| F. Full name <u>Kevin McGee</u> | Date (Mo., Day, Year) <u>5/13/09</u> | Amount of each disbursement this period \$ <u>500.00</u> |
| Mailing Address <u>201 Meadlands Dr.</u> | | |
| City, State, Zip Code <u>Brandon, MS 39047</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ <u>500.00</u> |

Name of Candidate or Committee Lenders Political Action Committee
 Reporting period 1/1/09 through 12/31/09

ITEMIZED DISBURSEMENTS

| | | |
|------------------------------------|---------------------------|--|
| A. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mary Coleman | 10 / 20 / 09 | \$ 250.00 |
| Mailing Address | | |
| 755 Avignon Drive | | |
| City, State, Zip Code | | |
| Ridgeland, MS 39157 | | |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 250.00 |
| B. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Jack Gordon | 12 / 7 / 09 | \$ 500.00 |
| Mailing Address | | |
| P.O. Box 377 | | |
| City, State, Zip Code | | |
| Okolona, MS 38860 | | |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 500.00 |
| C. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Merle Flowers | 9 / 9 / 09 | \$ 500.00 |
| Mailing Address | | |
| P.O. Box 750 | | |
| City, State, Zip Code | | |
| Southaven, MS 38671 | | |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 500.00 |
| D. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Walter Michel | 9 / 21 / 09 | \$ 1,000.00 |
| Mailing Address | | |
| 2630 Ridgewood Road Suite B | | |
| City, State, Zip Code | | |
| Jackson, MS 39216 | | |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 1000.00 |
| E. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| David Blount | 11 / 3 / 09 | \$ 500.00 |
| Mailing Address | | |
| P.O. Box 641 | | |
| City, State, Zip Code | | |
| Jackson, MS 39205 | | |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 500.00 |
| F. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Chris McDaniel | 4 / 27 / 09 | \$ 500.00 |
| Mailing Address | | |
| 506 South Court Street | | |
| City, State, Zip Code | | |
| Ellisville, MS 39437 | | |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 500.00 |

Name of Candidate or Committee Lenders Political Action CommitteeReporting period 1/1/09 through 12/31/09

ITEMIZED DISBURSEMENTS

| | | | |
|------------------------------------|-----------------------------|---------------------------|--|
| A. Full name | <u>Billy Hewes</u> | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | <u>P.O. Box 2387</u> | <u>5 / 18 / 09</u> | \$ 500.00 |
| City, State, Zip Code | <u>Gulfport, MS 39560</u> | <u> / / </u> | \$ |
| Purpose of Disbursement (Optional) | | Aggregate Year-to-date | \$ 500.00 |
| B. Full name | <u>Michael Watson</u> | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | <u>P.O. Box 964</u> | <u>4 / 21 / 09</u> | \$ 500.00 |
| City, State, Zip Code | <u>Pascagoula, MS 39568</u> | <u> / / </u> | \$ |
| Purpose of Disbursement (Optional) | | Aggregate Year-to-date | \$ 500.00 |
| C. Full name | <u>Tate Reeves</u> | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | <u>P.O. Box 24355</u> | <u>7 / 30 / 09</u> | \$ 4,000.00 |
| City, State, Zip Code | <u>Jackson, MS 39225</u> | <u> / / </u> | \$ |
| Purpose of Disbursement (Optional) | | Aggregate Year-to-date | \$ 4,000.00 |
| D. Full name | <u>George Flaggs Jr.</u> | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | <u>P.O. Box 1674</u> | <u>7 / 30 / 09</u> | \$ 1,000.00 |
| City, State, Zip Code | <u>Vicksburg, MS 39181</u> | <u> / / </u> | \$ |
| Purpose of Disbursement (Optional) | | Aggregate Year-to-date | \$ 1,000.00 |
| E. Full name | <u>Lee Yancy</u> | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | <u>423 Woodlands Circle</u> | <u>8 / 4 / 09</u> | \$ 500.00 |
| City, State, Zip Code | <u>Brandon, MS 39047</u> | <u> / / </u> | \$ |
| Purpose of Disbursement (Optional) | | Aggregate Year-to-date | \$ 500.00 |
| F. Full name | <u>Dean Kirby</u> | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address | <u>P.O. Box 54205</u> | <u>9 / 29 / 09</u> | \$ 2000.00 |
| City, State, Zip Code | <u>Pearl, MS 39288</u> | <u> / / </u> | \$ |
| Purpose of Disbursement (Optional) | | Aggregate Year-to-date | \$ 2000.00 |

Name of Candidate or Committee LENDERS Political Action CommitteeReporting period 1/01/09 through 12/31/09

ITEMIZED RECEIPTS

| | | |
|---|--------------------------------------|--|
| A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>1st Franklin Financial Corp.</u> | <u>2/19/2009</u> | \$ <u>6,200.00</u> |
| Mailing Address <u>P.O. Box 880</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Toccoa, GA 30577</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) <u> </u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) <u> </u> | Aggregate year-to-date | \$ <u>6,200.00</u> |
| B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Acceptance Loan Corp.</u> | <u>2/19/09</u> | \$ <u>600.00</u> |
| Mailing Address <u>P.O. Box 159</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Jackson, AL 36545</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) <u> </u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) <u> </u> | Aggregate year-to-date | \$ <u>600.00</u> |
| C. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>CMB Financial Services</u> | <u>6/30/09</u> | \$ <u>600.00</u> |
| Mailing Address <u>P.O. Box 1731</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Hattiesburg, MS 39403</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) <u> </u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) <u> </u> | Aggregate year-to-date | \$ <u>600.00</u> |
| D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Fidelity National Loans</u> | <u>2/13/09</u> | \$ <u>3,400.00</u> |
| Mailing Address <u>P.O. Box 490</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>HOLLY Springs, MS 38635</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) <u> </u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) <u> </u> | Aggregate year-to-date | \$ <u>3,400.00</u> |

~~XXXXXXXXXX~~

Len Pac

Page 2 of 4Name of Candidate or Committee Lenders Political Action CommitteeReporting period 11/01/2009 through 12/31/2009

ITEMIZED RECEIPTS

| | | | |
|--|--|--------------------------------------|--|
| A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Financial Management Corp.</u> | | <u>2 / 12 / 09</u> | \$ <u>3,600.00</u> |
| Mailing Address <u>P.O. Box 391</u> | | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Meridian, MS 39302</u> | | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | | Aggregate year-to-date | \$ <u>3,600.00</u> |
| B. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>First Heritage Credit</u> | | <u>2 / 13 / 09</u> | \$ <u>3,800.00</u> |
| Mailing Address <u>605 Crescent Blvd, #101</u> | | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Ridgeland, MS 39157</u> | | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | | Aggregate year-to-date | \$ <u>3,800.00</u> |
| C. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>First Metropolitan Financial</u> | | <u>2 / 13 / 09</u> | \$ <u>1,200.00</u> |
| Mailing Address <u>5909 Shelby Oaks Dr., Ste. 116</u> | | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Memphis, TN 38184</u> | | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | | Aggregate year-to-date | \$ <u>1,200.00</u> |
| D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Grubbs Management & Consultants</u> | | <u>2 / 16 / 09</u> | \$ <u>600.00</u> |
| Mailing Address <u>947 West Capitol St.</u> | | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Jackson, MS 39203</u> | | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | | Aggregate year-to-date | \$ <u>600.00</u> |

Name of Candidate or Committee Lenders Political Action CommitteeReporting period 1/01/09 through 12/31/09

ITEMIZED RECEIPTS

| | | |
|--|-----------------------------------|--|
| A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Gulf Islands Credit</u> | <u>2</u> / <u>17</u> / <u>09</u> | \$ <u>400.00</u> |
| Mailing Address <u>1115 Pass Rd.</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Gulfport, MS 39532</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | Aggregate year-to-date | \$ <u>400.00</u> |
| B. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Pioneer Credit Company</u> | <u>4</u> / <u>01</u> / <u>09</u> | \$ <u>2,600.00</u> |
| Mailing Address <u>1870 Executive Park NW</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Cleveland, TN 37312</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | Aggregate year-to-date | \$ <u>2,600.00</u> |
| C. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Republic Finance</u> | <u>2</u> / <u>18</u> / <u>09</u> | \$ <u>5,800.00</u> |
| Mailing Address <u>P.O. Box 15429</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Baton Rouge, LA 70895</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | Aggregate year-to-date | \$ <u>5,800.00</u> |
| D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Sebastopol Finance, LLC</u> | <u>2</u> / <u>18</u> / <u>09</u> | \$ <u>400.00</u> |
| Mailing Address <u>P.O. Box 332</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Sabastopol, MS 39359</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | Aggregate year-to-date | \$ <u>400.00</u> |

Name of Candidate or Committee Lenders Political Action CommitteeReporting period 1/1/09 through 12/31/09

ITEMIZED RECEIPTS

| | | |
|--|-----------------------------------|--|
| A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Third Union Finance</u> | <u>3</u> / <u>3</u> / <u>09</u> | \$ <u>800.00</u> |
| Mailing Address <u>P.O. Box 400</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Olive Branch, MS 38654</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | Aggregate year-to-date | \$ <u>800.00</u> |
| B. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Tower Finance Co.</u> | <u>2</u> / <u>6</u> / <u>09</u> | \$ <u>400.00</u> |
| Mailing Address <u>P.O. Box 238</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Forest, MS 39074</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | Aggregate year-to-date | \$ <u>400.00</u> |
| C. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Tower Loan</u> | <u>2</u> / <u>13</u> / <u>09</u> | \$ <u>14,000.00</u> |
| Mailing Address <u>P.O. Box 320001</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Floewood, MS 39232</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | Aggregate year-to-date | \$ <u>14,000.00</u> |
| D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____ | Date (Mo., Day, Year) | Amount of each receipt this period |
| Full name <u>Treasurer Loans, Inc.</u> | <u>2</u> / <u>13</u> / <u>09</u> | \$ <u>1,800.00</u> |
| Mailing Address <u>345 Hwy 6 West</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| City, State, Zip Code <u>Batesville, MS 38606</u> | <u> </u> / <u> </u> / <u> </u> | \$ |
| Name of Employer (Required) | <u> </u> / <u> </u> / <u> </u> | \$ |
| Occupation (Required) | Aggregate year-to-date | \$ <u>1800.00</u> |